



## Public Adjuster Firm Registration-PA-2

For Corporation, Association or Partnership

**Fee Requirement:** Attach a check or money order for \$100 payable to the Director of Insurance.

Name of Firm		Tax #
Business Address (Number, Street)		Suite/Room Number
City	State	Zip Code
Firm's e-mail address	Firm's Web site address	Telephone # of Firm

(Check one)

☐ Corporation ☐ Association ☐ Partnership ☐ Limited Liability Company ☐ Sole Proprietorship

Enter full name(s), address(es) and social security number(s) of officer(s), director(s), or member(s) responsible for the compliance of the firm with the laws of this state and the rules and regulations of the Director.

Name	Title	Social Security #	Home Address

List all members, officers, directors and employees. Continue list on reverse side of form if necessary.

Name	Name

1. Has the public adjuster firm or any owner, partner, officer or director ever been convicted of, or is the public adjuster firm or any owner, partner, officer, or director currently charged with committing a crime, whether or not adjudication was withheld?

☐ Yes ☐ No

"Crime" includes a misdemeanor, felony or a military offense. You may exclude misdemeanor traffic citations and juvenile offenses. "Convicted" includes, but is not limited to, having been found guilty by verdict of a judge or jury, having entered a plea of guilty or nolo contendere, or having been given probation, a suspended sentence or a fine.

If you answer yes, you must attach to this application:

- a) a written statement explaining the circumstances of each incident;
- b) a certified copy of the charging document; and
- c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment.

2. Has the public adjuster firm or any owner, partner, officer or director ever been involved in an administrative proceeding regarding any professional or occupational license?

☐ Yes ☐ No

"Involved" means having a license censured, suspended, revoked, canceled, terminated, or being assessed a fine, a cease and desist order, a prohibition order, a compliance order, placed on probation or surrendering a license to resolve an administrative action. "Involved" also means being named as a party to an administrative or arbitration proceeding, which is related to a professional or occupational license. "Involved" also means having a license application denied or the act of withdrawing an application to avoid a denial. You may **exclude** terminations due solely to noncompliance with continuing education requirements or failure to pay a renewal fee.

If you answer yes, you must attach to this application:

- a) a written statement identifying the type of license and explaining the circumstances of each incident;
- b) a certified copy of the Notice of Hearing or other document that states the charges and allegations; and
- c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment.

3. Has any demand been made or judgment rendered against the public adjuster firm or any owner, partner, officer or director for overdue monies by an insurer, insured or producer, or have you ever been subject to a bankruptcy proceeding? ☐ Yes ☐ No  
If you answer yes, submit a statement summarizing the details of the indebtedness and arrangements for repayment.
4. Has the public adjuster firm or any owner, partner, officer or director ever been notified by any jurisdiction to which you are applying of any delinquent tax obligation that is not the subject of a repayment agreement? ☐ Yes ☐ No  
If you answer yes, identify the jurisdiction(s): \_\_\_\_\_
5. Is the public adjuster firm or any owner, partner, officer or director a party to, or ever been found liable in any lawsuit or arbitration proceeding involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty? ☐ Yes ☐ No  
If you answer yes, you must attach to this application:  
a) a written statement summarizing the details of each incident;  
b) a certified copy of the petition, complaint or other document that commenced the lawsuit or arbitration; and  
c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment.
6. Has the public adjuster firm or any owner, partner, officer or director ever had an insurance agency contract or any other business relationship with an insurance company terminated for any alleged misconduct? ☐ Yes ☐ No  
If you answer yes, you must attach to this application:  
a) a written statement summarizing the details of each incident and explaining why you feel this incident should not prevent you from receiving an insurance license; and  
b) certified copies of all relevant documents.
7. Has any authorized public adjuster firm member, officer or director been employed in a vocation other than the claim adjusting business? ☐ Yes ☐ No  
If you answer yes, give the name of each member, officer or director, the name of their employer and the employer's address in a supplemental statement.
8. Has the public adjuster firm filed a rate schedule of charges for services with the Director? ☐ Yes ☐ No
9. Has the Director approved the public adjuster firm's contract form? ☐ Yes ☐ No

**Signature(s) of officer(s), director(s) or member(s) responsible for compliance:**

_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
Date

**Important Notice:** Disclosure of this information is **required** under the Illinois Revised Statutes' insurance laws. Failure to provide this information will result in this form not being processed. This form has been approved by the Forms Management Center.